

Work Order ID 108726

D-3942-3

October-29-13 9:52:19 AM

B 1 0 8 7 2 6

108726

Page 1

Item ID: D3942-3

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Clip

Stop

NS2

Start Date: 10/24/13 Start Qty: 20.00

20

Cust Item ID:

Required Date: 10/29/13 Req'd Qty: 20.00

20

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 13-11-01 Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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D3942	C
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100	0.00
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100

Waterjet

FLOW CNC Waterjet

304.050

Memo

0.00

20

Jm 13-11-23

1-Cut as per Dwg D3942-3

Dwg Rev: C

Prog Rev: C

2-Deburr if necessary

110	QC2- Inspect parts off machine FAI/FAIB	0.00
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110

QC

Quality Control

Memo

0.00

20

Jm 13-11-23

NCR: Yes / No

DQA: Date:

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS								
				Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>						
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector		
Doc/Data														
Equip/Tooling														
Operator														
Material														
Setup														
Other														
Process														
Supplier														
Training														
Unapproved														
FAULT CATEGORY														
Landing Gear Bending Centre Not Concentric to O/S Cracks Crushed/Crimped Cuffs Heat Treat Inspection Strip in Tube Ripples in Bend Torque Waves in Extrusion Turning Sequence Wave/Twist in Tube				General Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/>			Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/>			Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/>			Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other <input type="checkbox"/>	

Work Order ID 108726

October-29-13 9:52:19 AM

108726

Page 2

Item ID: D3942-3

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Clip

Stop

NS2

Start Date: 10/24/13 Start Qty: 20.00

20

Cust Item ID:

Required Date: 10/29/13 Req'd Qty: 20.00

20

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 *120* QC Quality Control	QC8- Inspect parts - second check Memo	0.00 27 0.89 13/11/25				20			
140 *140* Packaging Packaging	Identify as per dwg & Stock Location: Memo	0.00 55074				13/11/25 (20)			DAS 32 9.89

140
140
Packaging
Packaging150
150
QC
Quality Control150
150
QC
Quality Control

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS								
				Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data														
Equip/Tooling														
Operator														
Material														
Setup														
Other														
Process														
Supplier														
Training														
Unapproved														
FAULT CATEGORY														
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	
													<input type="checkbox"/> Other	

Picklist Print

October-29-13 9:52:19 AM

Page 1

Work Order ID: 108726

Parent Item: D3942-3

Parent Item Name: Clip

Start Date: 10/24/13

Required Date: 10/29/13

Start Qty: 20.00

Required Qty: 20.00

Comments: Ipp Rev:A UPDATE TO REV B 10-11-24 JLM VERIFIED BY:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M304S18GA 304/316 .050 Sheet		Purchased	No			100	sf	319.3774	0.015	0.31579 0.5		JM-3-11-23	
Location													
				MAT019			166.45001						
					117188		3.88						
					117766		5						
					120604		5						
					122325		3						
					123155		3						
					124572		0.00001						
					M126647		146.57						
				MAT020			152.92742						
					120243		0.928						
					121626		1.529894						
					124029		84.046526						
					M126098		66.423						

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS									
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>								
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>								
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>								
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector				
Doc/Data															
Equip/Tooling															
Operator															
Material															
Setup															
Other															
Process															
Supplier															
Training															
Unapproved															
FAULT CATEGORY															
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio				<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	
														<input type="checkbox"/> Other	

DART AEROSPACE LTD	Work Order:	108724
Description: Clip	Part Number:	D3942-3
Inspection Dwg: D3942 Rev: C		Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

DAS

Measured by:	Jm	Audited by:	27 9.89	Preliminary Approval:	
Date:	13-11-23	Date:	13/11/23	Date:	

Rev	Date	Change	Revised by	Approved
A	09.06.22	New Issue	KJ	
B	11.01.17	Dimensions update per Dwg Rev B	KJ	
C	13.02.27	Dimensions update per Dwg Rev C	KJ	

8

7

6

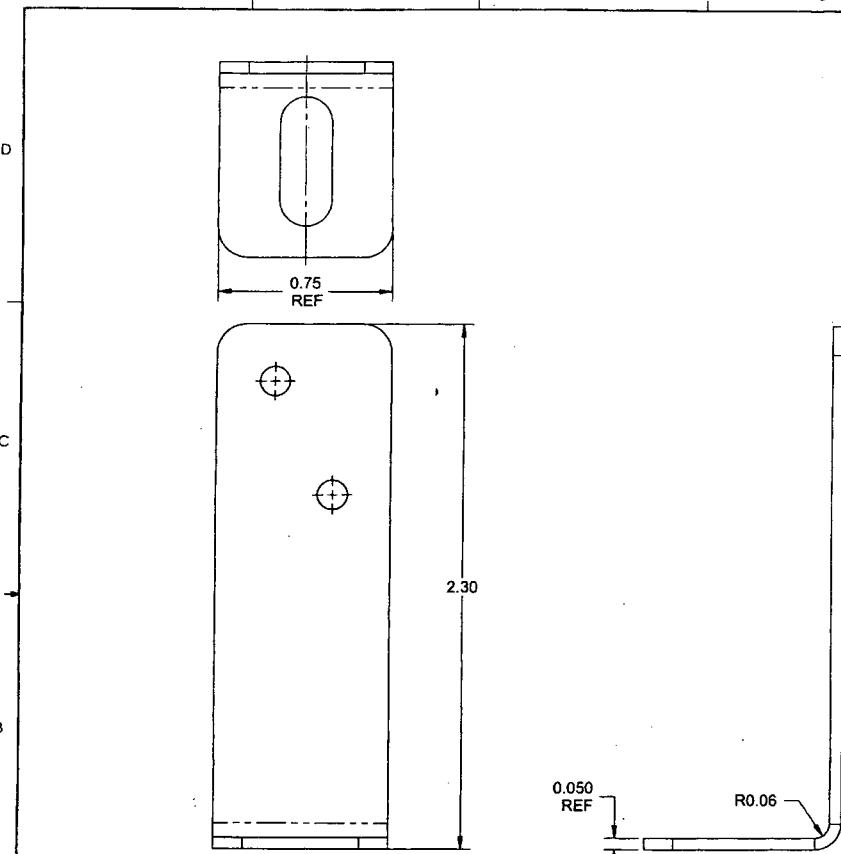
5

4

3

2

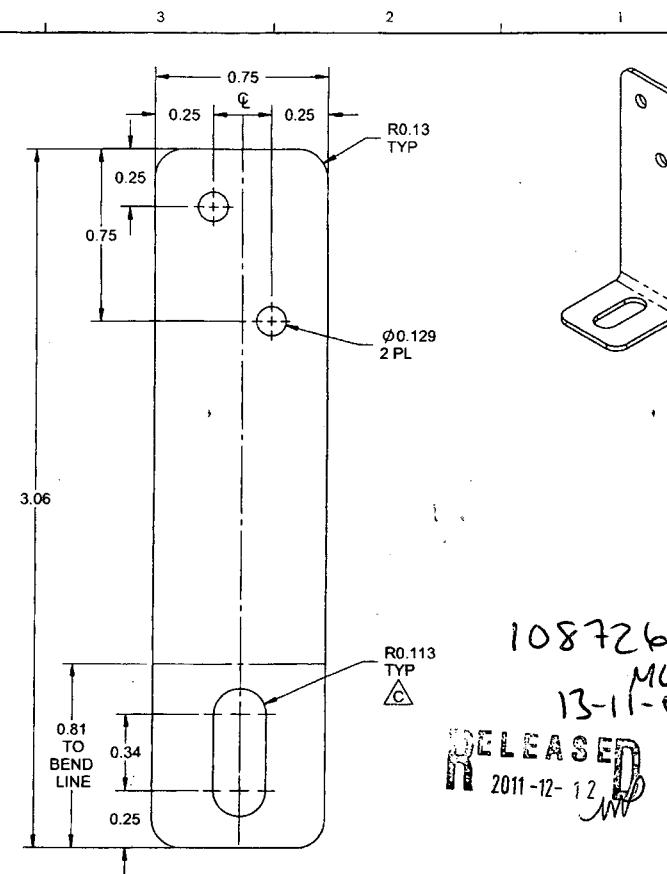
1



D3942-1 ANGLE
MADE FROM D3942-1F

NOTES:

- 1) MATERIAL: AISI 304/316 STAINLESS STEEL SHEET PER AMS 5513 OR AMS 5524
18 GAUGE (0.050 THICK)
REF DART SPEC M304518GA
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
- 7) WEIGHT: 0.031BS



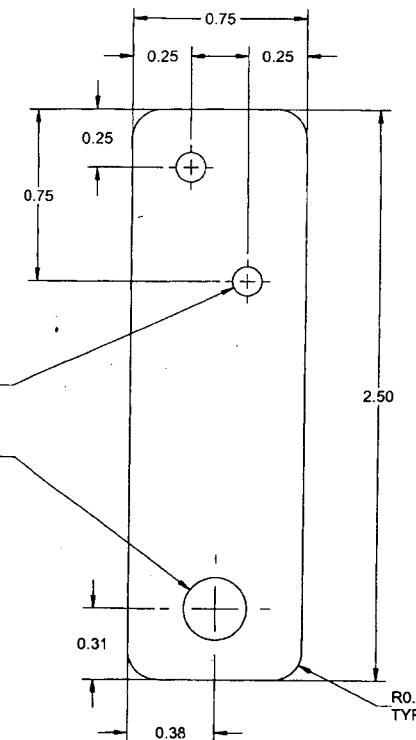
D3942-1F FLAT PATTERN

C	INCREASE SLOT/HOLE SIZE TO ALLOW PROPER FITTING OF PANEL: 0.113 WAS 0.094, ZN B2-1; 0.275 WAS 0.257, ZN C3-2 (REF PAR 10-008)	XDF	11.09.02
B	REVISE LENGTH OF -3 PART, ZN C3-2; UPDATE IDENTIFICATION, ZN A7-1, A7-2	<i>[Signature]</i>	10.11.19
A	NEW ISSUE	HS	09.05.06
REV.	DESCRIPTION	BY	DATE
DESIGN	<i>[Signature]</i>	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	XDF	REV. C	
CHECKED	<i>[Signature]</i>	DRAWING NO. D3942 SHEET 1 OF 2	
MFG. APPR.	<i>[Signature]</i>	TITLE SCALE	
APPROVED	<i>[Signature]</i>	DE APPR. NTS.	
DATE	11.09.02	BRACKET	

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WRITTEN PERMISSION FROM DART AEROSPACE LTD.

108726
MLJ
13-11-01
RELEASED
2011-12-12
[Signature]

108726



D3942-3 CLIP

NOTES:

- 1) MATERIAL: AISI 304/316 STAINLESS STEEL SHEET PER AMS 5513 OR AMS 5524
18 GAUGE (0.050 THICK)
REF DART SPEC M304S18GA
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
- 7) WEIGHT: 0.03 lbs

DESIGN	<i>[Signature]</i>	DART AEROSPACE LTD	
DRAWN	<i>[Signature]</i>	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>[Signature]</i>	DRAWING NO. D3942	
MFG. APPR.	<i>[Signature]</i>	REV. C	
APPROVED	<i>[Signature]</i>	SHEET 2 OF 2	
DE APPR.	<i>[Signature]</i>	TITLE	
DATE	11.09.02	SCALE	
		NTS:	
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8 7 6 5 4 3 2 1